



REPLY TO
ATTENTION OF

DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND
2050 WORTH ROAD
FORT SAM HOUSTON, TX 78234-6000

MCHO-CL-P

OTSG/MEDCOM Policy Memo 07-018

Expires 25 June 2009

25 JUN 2007

MEMORANDUM FOR

COMMANDERS, MAJOR SUBORDINATE COMMANDS
DIRECTORS, OTSG/MEDCOM ONESTAFF

SUBJECT: Protected Health Information (PHI) in Executive Summaries, Information Papers, and Talking Papers

1. References:

a. DoD 6025.18-R, Department of Defense Health Information Privacy Regulation, January 2003.

b. AMEDD Staff Officer's Guide, February 2007.

2. Purpose: To establish a policy for limiting the use of PHI in executive summaries (EXSUMs), Information Papers, and Talking Papers.

3. Proponent. The proponent for this policy is the Patient Administration Division, Health Policy and Services Directorate.

4. Policy:

a. PHI can be used or disclosed for treatment, payment, and healthcare operations purposes without the patient's consent. Healthcare operations includes conducting quality assessment and improvement activities, case management and care coordination, as well as business management and general administrative activities of the entity.

b. The use and disclosure of PHI will be limited to the minimum necessary to meet the intended purpose of the communications.

c. PHI will be shared only with individuals having a need to know.

5. Responsibilities: Proponent offices will prepare EXSUMs, Information Papers, and Talking Papers containing PHI to limit the information disclosed to the minimum necessary to meet the intended purpose.

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6. Procedures:

a. Proponents will carefully consider the use and disclosure of PHI and the intended audience.

b. EXSUMS, Information Papers, and Talking Papers containing PHI will disclose only de-identified data. Information such as name, rank, or other individually identifiable information will not be disclosed. Guidance for the preparation of EXSUMs is enclosed. Examples of an EXSUM containing PHI and de-identified PHI are enclosed.

FOR THE COMMANDER:

2 Encls



WILLIAM H. THRESHER
Chief of Staff

UNCLASSIFIED

EXECUTIVE SUMMARY

20 April 20XX

(U) PREPARATION OF AN EXECUTIVE SUMMARY (EXSUM). (U) (Office Symbol)
An EXSUM is a brief summary in response to a question or to provide information. The EXSUM should not exceed 15 lines. Prepare in a concise and informative style in the active voice. Use approved acronyms and abbreviations; normally, spell out abbreviations the first time. *EXSUMs containing protected health information should be de-identified and should not contain name, rank, or other individually identifiable information.* Use Arial 12 pitch font and 1-inch margins. The EXSUM should begin with the overall classification, followed by the subject (capitalized and underlined) and the originator's office symbol, followed by the body of the summary. Identify the originator and indicate EXSUM approval as shown below. The words "PREPARE MEMO" should end the summary. PREPARE MEMO_____.

LTC Staffer/DASG-XX/(703)681-XXXX

APPROVED BY: COL Boss

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Example of EXSUM Containing Protected Health Information

(U) INCIDENT INVOLVING REPORTING INCONCLUSIVE POSITIVE HIV RESULTS PERTAINING TO MOBILIZED SOLDIER AT THE FORT DIX SRC, PATTERSON ARMY HEALTH CLINIC, FT MONMOUTH, NJ (U) (MCXS-DCA) HIV screening was conducted on SPC John E. Smith (assigned to 234th Maint. Co, Wash. DC) as part of the mobilization requirement in May 04. Negative results were reported in CHCS in error on the sample drawn on 18 May 04. The demobilization HIV screen, drawn on 3 Feb 05, yielded positive results. Based on this result, the CHCS results of the MOB screen from May 04 were reviewed and confirmed to be reported as negative, but this was an appended report. The original results posted in CHCS indicated "Lab Error-Additional Testing Required (ACR)" this result was appended by Dix staff later the same day. Based on this Viromed was contacted and indicated that per their internal records the test was positive. Investigation is continuing. The Soldier demobilized on 2 Feb 2005, prior to receipt of the positive results. The Fort Dix Community Health Nurse (CHN) informed the Soldier's leadership who returned him back on active duty and notified him of the positive results. The Soldier remains on active duty.

Example of EXSUM Containing De-identified Protected Health Information

(U) INCIDENT INVOLVING REPORTING INCONCLUSIVE POSITIVE HIV RESULTS PERTAINING TO MOBILIZED SOLDIER AT THE FORT DIX SRC, PATTERSON ARMY HEALTH CLINIC, FT MONMOUTH, NJ (U) (MCXS-DCA) HIV screening was conducted on a Soldier (assigned to 234th Maint. Co, Wash. DC) as part of the mobilization requirement in May 04. Negative results were reported in CHCS in error on the sample drawn on 18 May 04. The demobilization HIV screen, drawn on 3 Feb 05, yielded positive results. Based on this result, the CHCS results of the MOB screen from May 04 were reviewed and confirmed to be reported as negative, but this was an appended report. The original results posted in CHCS indicated "Lab Error-Additional Testing Required (ACR)" this result was appended by Dix staff later the same day. Based on this Viromed was contacted and indicated that per their internal records the test was positive. Investigation is continuing. The Soldier demobilized on 2 Feb 2005, prior to receipt of the positive results. The Fort Dix Community Health Nurse (CHN) informed the Soldier's leadership who returned him back on active duty and notified him of the positive results. The Soldier remains on active duty.